

Sixty-eight Cases of Child Chronic Cough Treated by Moxibustion

CUI Xia 崔霞, WANG Su-mei 王素梅 & WU Li-qun 吴力群

Dongfang Hospital, Beijing University of Traditional Chinese Medicine, Beijing 100078, China

Objective: To observe the therapeutic effects of moxibustion for chronic cough in children. **Methods:** 68 child cases of chronic cough were treated by moxibustion. **Results:** 54 cases were cured, 13 cases improved, and one case failed. The cure rate was 79.2%, with a total effective rate of 98.5%. **Conclusion:** The moxibustion therapy has definite therapeutic effect for children chronic cough.

Key words: chronic cough; acupuncture treatment; moxibustion

GENERAL DATA

All the 68 child cases of chronic cough were outpatients, with the shortest duration of illness for 4 weeks and the longest for 6 months. Among them, 36 cases were male and 32 cases female, ranging in age from 2 years to 12 years.

METHODS

The child patient was asked to be in a sitting position, with the neck extending posteriorly. Moxibustion with the moxa stick was successively applied on Tiantu (CV 22), Shanzhong (CV 17), Feishu (BL 13), Dingchuan (EX-B1) and Hegu (LI 4), with the moxa stick kept apart from the skin for about 2–3 cm, till each of the points became warm and congested. For indigestion, Zhongwan (CV 12), Pishu (BL 20) and Weishu (BL 21) were added. The treatment was given once daily, with 9 sessions constituting one therapeutic course. The therapeutic effects were evaluated after one or two courses given according to individual conditions of the patients.

Criteria for the therapeutic effects

Cured: Disappearance of the cough and the dry and moist rales of the lungs. Improved: The cough was alleviated, with diminished dry and moist rales. Failed: No improvement of the cough and the signs from the lung.

RESULTS

In the 68 child cases of chronic cough, 54 cases were cured, 13 cases improved, and one case failed. The

cure rate was 79.2%, with a total effective rate of 98.5%.

TYPICAL CASE

An illustrative case

A 3-year-old boy patient had cough for over one month. Auscultation on the lung had found some dry rales. He was once diagnosed to have bronchitis, and was treated for one week with antibiotics and patent Chinese medicine for resolving the phlegm. The cough was then alleviated, but he still had profuse sputum. He continued the treatment with antibiotics and herbal decoction for another week. The symptoms were sometimes mild and sometimes severe. Then, he was treated with herbal decoction and application of the plaster for checking cough on the back for a week, after which the symptoms showed no obvious improvement. Considering that the child had chronic cough, the authors stopped the treatment with herbal decoction and the application of medicinal plaster, and tried to use moxibustion for the treatment. The moxibustion was applied at bilateral Feishu (BL 13), Dingchuan (EX-B1) and Hegu (LI 4), with the moxa stick kept 2–3 cm apart from the skin. For cough with profuse sputum, moxibustion on Tiantu (CV 22) and Shanzhong (CV 17) were added; and for the long illness course with poor appetite, Pishu (BL 20) and Weishu (BL 21) were added. When the local skin round the point became red and warm, the moxa stick was moved to the next point. The treatment was given once daily

for 9 consecutive days. After the first moxibustion treatment, the child got decreased frequency of cough in the night; and after the third treatment, the cough was obviously alleviated, the sputum and the wheezes were reduced, and the dry rales lowered. He continued the treatment for 6 days, after which the cough and sputum disappeared, and no abnormal signs were found in the lung. His appetite was also improved.

COMMENTS

The child chronic cough may last over 3–4 weeks,¹ and it may happen during the process of growth in many children. ZOU Shang-qun² has summed up 112 cases of child chronic cough, and thought that mycoplasmal infection, coughing variant asthma and repeated infection of the respiratory tract are the main causative factors. In a clinical observation for 120 child cases of chronic cough, WANG You-cheng³ also considers repeated infection of the respiratory tract, coughing variant asthma and myoplasma infection as the common causative factors for chronic cough in children. Besides, he thinks that chronic cough may be secondarily induced by nasosinusitis and gastroesophageal reflux.

In the present study for the 68 child cases of chronic cough, 7 cases had pneumonia, 11 cases had asthma, 20 cases had bronchitis and the rest cases with cause unknown; but all of them had a history of repeated respiratory infection. And the child patients would often be accompanied with poor appetite and sleep, and decreased body resistance. The moxibustion therapy the authors adopted can bring about quick effects, and it can be well accepted by the child patients.

In the moxa stick the authors used, some Chinese herbs for warming the channels and eliminating cold, clearing away the lung-heat and resolving the phlegm and the promoting blood circulation and removing blood stasis were added, which can give not only the

effects of warming the channels and eliminating cold and dredging the channels and collaterals, but also the marked effects of relieving cough and asthma, and strengthening the spleen and replenishing *qi*. Chronic cough has a long duration of illness, leading to loss and deficiency of lung-*qi* and insufficiency of spleen-*qi*, and further resulting in the interior formation of phlegm-damp and the dysfunction of the lung in dispersing and descending, hence the occurrence of continuous cough. The principle for treatment it should be tonifying the lung and strengthening the spleen, ventilating the lung and resolving phlegm, and lowering the adverse flow of *qi* to stop cough. Therefore, moxibustion should be applied on Feishu (BL 13), Pishu (BL 20) and Weishu (BL 21) for tonifying the lung and strengthening the spleen, so as to treat both the principal and the secondary aspects of the disease at the same time. Dingchuan (EX-B1) and Tiantu (CV 22) are the local points, and have the effect of lowering the adverse flow of *qi* to relieve asthma. Moxibustion on Shanzhong (CV 17) is for enhancing the effect of checking the adverse flow of *qi* and resolving phlegm to stop cough. In a combined use with Feishu (BL 13), Hegu (LI 4) can enhance the lung-ventilating effect. It has been proved by modern medicine that moxibustion can not only promote the resorption of inflammatory materials, but also improve the blood rheology and raise immunity.

REFERENCES

1. Ding GF, Wan WL. Infantile chronic cough. Overseas Medicine Pediatrics 1995; 22: 15-18.
2. Zou SQ. Approach to cause of disease and diagnosis of child chronic cough. China Journal of Contemporary Pediatrics 2002; 4: 502-503.
3. Wang YC, Tang XY. Analysis on cause of disease of chronic cough in 120 infantile cases. Zhejiang Practical Medicine 2003; 8: 373.

(Translated by WANG Xin-zhong 王新中)